

Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	CONFOCAL IMAGING EQUIPMENT IN PARTICULAR FOR ENDOSCOPE
Attorney Docket Number::	0501-1095
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	1
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: BERTRAND
Middle Name::
Family Name:: VIELLEROBE
Name Suffix::
City of Residence:: VINCENNES
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 8, RUE D'ESTIENNE D'ORVES
Address::
City of Mailing Address:: VINCENNES
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-94300

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: MAGALIE
Middle Name::
Family Name:: GENET
Name Suffix::
City of Residence:: PARIS
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 74, COURS DE VINCENNES
Address::
City of Mailing Address:: PARIS

State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-75012

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: FRÉDÉRIC
Middle Name::
Family Name:: BERIER
Name Suffix::
City of Residence:: COURBEVOIE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 66, RUE DE STRASBOURG
City of Mailing Address:: COURBEVOIE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-92400

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: FRANÇOIS
Middle Name::
Family Name:: LACOMBE
Name Suffix::
City of Residence:: CHAVILLE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 2173, AVENUE ROGER SALENGRO

Address::

City of Mailing Address:: CHAVILLE

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-92370

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: AYMERIC

Middle Name::

Family Name:: PERCHANT

Name Suffix::

City of Residence:: PARIS

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 24, RUE DES CORDELIÈRES

Address::

City of Mailing Address:: PARIS

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-75013

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: GEORGES

Middle Name::

Family Name:: LE GOUALHER

Name Suffix::

City of Residence:: PARIS

State or Province of

Residence::

Country of Residence:: FRANCE
Street of Mailing 3, RUE DE ROTTEMBOURG
Address::
City of Mailing Address:: PARIS
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-75012

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: SANDRA
Middle Name::
Family Name:: MARTI
Name Suffix::
City of Residence:: NANTERRE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 2, ALLÉE DE LA DANSE
Address::
City of Mailing Address:: NANTERRE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-92000

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: STÉPHANE
Middle Name::
Family Name:: BOURRIAUX
Name Suffix::
City of Residence:: CHAMPS SUR MARNE

State or Province of
 Residence::
 Country of Residence:: FRANCE
 Street of Mailing 4, ALLÉE DES CHARMILLES
 Address::
 City of Mailing Address:: CHAMPS SUR MARNE
 State or Province of Mailing Address::
 Country of Mailing Address:: FRANCE
 Postal or Zip Code of Mailing Address:: F-77420

Correspondence Information

Correspondence Customer 000466
 Number::

Representative Information

Representative Customer	000466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR02/04481	12/20/02

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	01/16980	12/28/01	Yes

Assignment Information

Assignee Name:: MAUNA KEA TECHNOLOGIES
Street of Mailing 9, RUE D'ENGHIEN
Address::
City of Mailing Address:: PARIS
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-75010